

Coverage and Monthly Premiums

Benefit recipients who enroll in the Teachers' Retirement Insurance Program (TRIP) receive health, prescription and behavioral health coverage. Dependent beneficiaries can be enrolled in the program at an additional cost and will have the same health plan as the benefit recipient. The monthly premium is based on the type of coverage selected and the permanent residence on file with TRS.

As a benefit recipient enrolled in TRIP, you are offered various health insurance coverage options:

♦ Teachers' Choice Health Plan (TCHP)

♦ Managed Care Plans (two types)

- Health Maintenance Organizations (HMOs)
- Open Access Plans (OAPs)

The health insurance options differ in the benefit levels they provide and the doctors and hospitals you can access. See the Benefits Comparison charts on pages 8-13 for information to help you determine which plan is right for you.

If you change health plans during the Benefit Choice Period, your new health insurance ID cards will be mailed to you directly from your health insurance carrier, not from the Department of Central Management Services. If you need to have services but have not yet received your ID cards, contact your health insurance carrier.

Remember, whatever health plan you elect during the Benefit Choice Period will remain in effect the entire plan year unless you experience a qualifying change in status that allows you to change plans.

Type of Plan	Not Medicare Primary	Not Medicare Primary	Not Medicare Primary	Medicare Primary*
	Under Age 26	Age 26-64	Age 65 and Above	All Ages
Benefit Recipient enrolled in any managed care plan	\$62.25	\$193.34	\$263.41	\$76.41
Benefit Recipient enrolled in TCHP when a managed care plan is available in their county of residence	\$161.54	\$455.92	\$685.68	\$198.93
Benefit Recipient enrolled in TCHP when a managed care plan is not available in their county of residence	\$80.77	\$227.97	\$342.85	\$99.47
Dependent Beneficiary enrolled in any managed care plan	\$249.06	\$773.33	\$1,053.62	\$264.69**
Dependent Beneficiary enrolled in TCHP when a managed care plan is available in their county of residence	\$323.07	\$911.83	\$1,371.34	\$397.88
Dependent Beneficiary enrolled in TCHP when a managed care plan is not available in their county of residence	\$323.07	\$911.83	\$1,371.34	\$298.41**

* You must enroll in both Medicare Parts A and B to qualify for the lower premiums. Send a copy of your Medicare card to TRS. If you or your dependent is actively working and eligible for Medicare, or you have additional questions about this requirement, contact the CMS Group Insurance Division, Medicare Coordination of Benefits (COB) Unit. See inside front cover for contact information.

** Medicare Primary Dependent Beneficiaries enrolled in a managed care plan, or in TCHP when no managed care plan is available, receive a premium subsidy.